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Date:

July 22, 2004

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To:	Company	City	Phone
ART UNIT 2661 Examiner:	United States Patent Office – Facsimile Centre	Alexandria, VA	(703) 872-9306

Re: Serial No. 09/740,931

Inventor(s): MATTSON J.

Title: METHOD AND SYSTEM FOR SIGNAL DEGRADE (SD)
INFORMATION PASSTHROUGH IN T-MIX SYSTEM

Preliminary Amendment attached.

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PAGE 1/5 * RCVD AT 7/22/2004 2:50:36 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1.0 * DNIS:8729306 * CSID:613 230 6706 * DURATION (mm:ss):01:34

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PTO/SB/21 (08-03)

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FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number	09/740,931
Filing Date	September 14, 2000
First Named Inventor	Mattson J.
Art Unit	2661
Examiner Name	
Attorney Docket Number	9-13528-140US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> Preliminary Amendment
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Max R. Wood, Reg. No. 40,388
Signature	
Date	July 22, 2004

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Typed or printed name	Max R. Wood, Reg. No. 40,388
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Date	July 22, 2004

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